2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2000 8:00 am
Secretary of State
05-10-2000 90035 001 ***900.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # G49552

1. Entity Name
BACKUS TURNER AND PARTNERS, INC.

Principal Place of Business	Mailing Address
4100 N.E. 2ND AVE. SUITE 206 MIAMI FL 33137 US	~~404 WASHINGTON AVE~~ #600 ~~MIAMI BEACH FL 33137-3538~~ US

2. Principal Place of Business	3. Mailing Address
	4100 NE Second Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc. # 206
City & State	City & State Miami FL
Zip / Country	Zip 33137 / Country USA

4. FEI Number 59-2331593 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TURNER, LAWRENCE O., JR
~~404 WASHINGTON AVE SUITE 600~~
~~MIAMI BEACH FL 33139~~

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable) 4100 NE Second Ave # 206
City Miami **FL** Zip Code 33137

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE [signature] 1/4/00
Signature, typed or printed name of registered agent and title if applicable Lawrence O. Turner Jr. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☑

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** *May Be Added to Fees*

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TURNER, ROBERTA BACKUS ~~404 WASHINGTON AVE #600~~ ~~MIAMI BEACH FL~~ ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☑ Change ☐ Addition 4100 NE Second Ave # 206 Miami, FL 33137
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP TURNER, LAWRENCE O., JR. ~~404 WASHINGTON AVE #600~~ ~~MIAMI BEACH FL~~ ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☑ Change ☐ Addition 4100 NE Second Ave # 206 Miami, FL 33137
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CR2E034 (9/99)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE [signature] 1/4/00 305-573-9996
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Lawrence O. Turner Jr. Date Daytime Phone #